



Committee on HOMELAND SECURITY

Chairman Michael McCaul

Opening Statement

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Statement of Chairman Michael McCaul (R-Texas) Committee on Homeland Security

“Ebola in the Homeland: The Importance of Effective International, Federal, State and Local Coordination”

Remarks as Prepared

We are here today to discuss the threat to the U.S. homeland from the Ebola virus and what is being done to stop the spread of this terrible disease. The crisis is unfolding at an alarming pace. Thousands have died in Africa and thousands more have been infected, including four selfless Americans working in Liberia who have been flown home for treatment. Now the virus has begun to spread to other parts of the world, and the American people are rightfully concerned. They are concerned because the Ebola virus is an unseen threat, and it is only a plane-flight away from our shores. We’ve witnessed that with the recent case here in Dallas—the first fatality from Ebola in the United States.

But we must be sure to confront this crisis with the facts. Blind panic won’t help us stop this disease from spreading, and fear-mongering will only make it harder to do so. That is why we are here today: to ask the American people’s questions and get answers from our experts. Americans are seeking assurance that our federal, state, and local officials are doing everything in their power to keep this virus out of the United States.

Already, there has been a vigorous international, federal, state, and local response. We hope to hear more today about exactly what has been done—and what needs to be done going forward. Two weeks ago, Thomas Eric Duncan traveled here from Liberia by way of the Brussels and Dulles airports, fell ill, and presented himself for treatment at Texas Health Presbyterian Hospital here in Dallas. Mr. Duncan’s diagnosis set in motion an extensive public health operation involving federal, state, and local officials to identify and assess any individuals with whom he may have had contact, a process called “contact-tracing.”

That contact-tracing effort continues today, and our prayers are with everyone who is currently being monitored as part of this incident. We are thankful that, to date, there have been no additional cases of Ebola stemming from this case. Contact-tracing is time consuming and difficult, but it is one of the few ways to contain the disease. Containment also requires swift, coordinated action. In this Committee’s hearings and investigation on the Boston Marathon bombings, we heard testimony about the importance of the “incident command system.”

The system is a vital tool for making sure first-responders at all levels engage quickly and decisively, rather than argue over who is in charge. The importance of such a response mechanism was highlighted in the 9/11 Commission report, and it has since saved countless lives. I was encouraged to learn officials here in Texas instituted this structure. Today, state and federal officials are co-located in the Dallas County Emergency Operations Center, enabling vital information sharing and coordination.

To be clear, the situation here at home is far different than what is happening in West Africa. We have a strong public health infrastructure in place, particularly here in Texas, which enables us to work to contain this virus more effectively. But Dallas is not the only area that must remain vigilant. We need to ensure that state and local responders nationwide are prepared to move quickly if the virus is detected anywhere else within our borders. Hospitals are recognizing this and have made nearly 190 inquiries with the CDC about cases they believed could be Ebola. Thankfully, testing was only warranted in about 24 of those cases, and only one case was confirmed as Ebola.

Public health and medical personnel must remain vigilant, ensure all hospital personnel are informed, follow protocols to identify this virus, and take appropriate quarantine measures. We must reinforce the importance of taking travel histories and sharing that information with all relevant personnel. Protecting the homeland from the Ebola virus also requires us to put measures in place out our airports. I am pleased the President announced earlier this week additional entry screening efforts are being launched. Beginning tomorrow, enhanced screening measures will be activated at JFK airport and soon after at Dulles, O'Hare, Newark, and Atlanta. These airports receive more than 94% of all travelers from Liberia, Sierra Leone, and Guinea. I look forward to hearing more about these enhanced screening efforts from our witnesses. The Department of Homeland Security has been actively involved in the response, and I commend Secretary Jeh Johnson for his leadership in bringing federal resources to the fight.

We must also closely monitor the situation overseas and continue our global response efforts. I have spoken with the President's Homeland Security Advisor Lisa Monaco numerous times to ensure our government is doing all that is necessary. We recently discussed exit screening procedures that have been put in place in Liberia, Sierra Leone, and Guinea by CDC-trained personnel. In the past two months, this screening has stopped 77 travelers with Ebola-like symptoms or contact history from boarding planes, out of a total of 36,000 individuals screened. None of those 77, that we are aware of, has been diagnosed with Ebola. While there have been many positive aspects of this response, there have also been missteps.

For instance, here in Dallas Mr. Duncan's travel history was not communicated to all relevant medical personnel when he first sought treatment, which led to his release from the hospital and the potential that additional people were exposed to the virus. There were also problems removing hazardous biomedical waste from the apartment where Mr. Duncan's family was quarantined. The soiled materials remained in the home with the quarantined individuals for days after the Ebola diagnosis was confirmed.

We must learn from these missteps, and ensure the proper procedures are established and followed should another case arise in the United States. Going forward, we must consider all policy options for stopping the spread of this horrific disease. I have heard many ideas directly from my fellow Texans—everything from stopping inbound flights from specific countries to additional screenings at home and abroad. We hope our witnesses will discuss options that are being considered and the tradeoffs we may have to confront.

We also have to ensure unnecessary government red tape does not slow down the response. I urge the Senate to follow the lead of the House and approve the Pentagon's request to transfer additional resources to the fight. The Defense Department is seeking to move \$750 million toward response efforts, and we should move swiftly to satisfy that request.

Now is not the time for politics. Congress has been loathe to get much done this session, and if there has ever been a time to come together and put pettiness aside, it is now. We must get this right and make sure that federal protocols are put in place and communicated to our local and state leaders when a situation this critical occurs.

My hope today is we won't focus on gotcha politics, instead hearing from our panels and focusing on a solutions based hearing. We are in the same boat. And we need to work hard to make sure that our Nation is protected from this threat. I want to thank the Ranking Member for being here in my home state of Texas in a show of support for this shared goal.

Before we begin, I also want to commend the first responders, medical personnel, and public health officials who have responded courageously to the case here in Dallas. Most importantly, our thoughts and prayers are with the victims and families affected by this crisis. I look forward to hearing from our distinguished panel of witnesses today on the recent response efforts and what more can be done to keep America safe.

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